Oncological highlights at CIRSE 2012

25 September 2012, Vienna, Austria: Interventional oncology is currently one of the most dynamic areas of interventional radiology (IR), with a vast array of treatment options currently being used and explored. As such, coverage of the field is of the utmost importance for any IR congress, and CIRSE 2012 did not disappoint. With a phenomenal array of sessions, workshops, simulation sessions and free papers, the congress covered the full spectrum of this exciting discipline.

Innovations in oncologic IR

Prof. Steven Rose (San Diego, CA/US) introduced the novel concept of oncolytic viral therapy, in which viruses can be harnessed to target cancer cells. This is possible due to genomic differences between cancer cells and normal cells.

The latest updates on irreversible electroporation (IRE) were presented by Dr. Laura Crocetti (Pisa/IT), who discussed the rationale and technique of the procedure, as well as experimental findings. Although a promising technique, more exact indications for its usage need to be devised.

Dr. Bradford Wood (Bethesda, MD/US) discussed hepatic chemosaturation – a novel therapy whereby the liver is percutaneously isolated by means of a special catheter system, and a high chemotherapeutic dosage is delivered intra-arterially. The hepatic blood is then filtered extracorporeally. This results in higher drug doses with lower systemic toxicity, and has shown promising results.

Dr. Hugo Rio Tinto (Lisbon/PT) advised on how to improve the outcomes of portal vein embolisation, which plays a vital role in increasing the pool of candidates suitable for hepatic resection.

Training in interventional oncology: beyond technology

Prof. Riccardo Lencioni (Pisa/IT) showed the scope of interventional oncology, which encompasses more than 20 procedures utilising a broad spectrum of agents and mechanisms (biologics, chemical, immune, etc.), creating a complex scenario requiring broad knowledge of medicine, and the ability to recognise and treat complications, as well as work closely with other disciplines.

Insights into the value and construction of a dedicated curriculum were given by Dr. David Kessel (Leeds/UK), who asserted that patients deserve to be treated by formally trained interventional oncology specialists. The challenge is to construct a curriculum that will convince patients and colleagues that interventional oncology is a safe and effective treatment option, instead of a last resort.

Dr. Lizbeth Kenny (Brisbane/AU) listed the qualities and responsibilities of an oncology specialist, including prolonged patient care, an in-depth understanding of cancers and their various therapies, and a willingness to engage in multidisciplinary teams (MDT). She encouraged IRs to gather the necessary evidence to back up their innovative treatments, and gave some inspiring examples from her own field of radiation oncology.

A round-table discussion and enthusiastic audience participation helped to round off a fascinating session.

Other highlights

Other sessions of particular note included sessions on *HIFU in oncology, Ablation of lung cancer, Synergies between loco-regional and systemic approaches in cancer management* and various sessions dedicated to radioembolisation and the treatment of HCC.